
form HUD-50075-SA (4/30/2003)
PHA Plans
Streamlined Annual
Version
U.S. Department of Housing and
Urban Development
Office of Public and Indian
Housing
OMB No. 2577-0226
(exp. 05/31/2006)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number. Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan for Fiscal
Year: Beginning 1 October 2006
PHA Name: Housing Authority of the City of Flatonia
NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

PHA Name: Housing Authority of the City of Flatonia Streamlined Annual Plan for Fiscal Year 2006
HA Code: TX297

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Streamlined Annual PHA Plan
Agency Identification
PHA Name: Housing Authority of the City of Flatonia
PHA Number: TX297

PHA Fiscal Year Beginning: (mm/yyyy) October 2006
PHA Programs Administered:
Public Housing and Section 8 Section 8 Only Public Housing Only
Number of public housing units: Number of S8 units: Number of public housing units: 20
Number of S8 units:
PHA Consortia: (check box if submitting a joint PHA Plan and complete table)
Participating PHAs PHA
Code
Program(s) Included in
the Consortium
Programs Not in
the Consortium
of Units
Each Program
Participating PHA 1:
Participating PHA 2:
Participating PHA 3:
PHA Plan Contact Information:
Name: Nancy M. Jasek Phone: 361-865-2534
TDD: 361-865-2534 Email (if available): fha@pcguns.net
Public Access to Information
Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)
PHA's main administrative office PHA's development management offices
Display Locations For PHA Plans and Supporting Documents
The PHA Plan revised policies or program changes (including attachments) are available for
public review and inspection. Yes No.
If yes, select all that apply:
Main administrative office of the PHA
PHA development management offices
Main administrative office of the local, county or State government
Public library PHA website Other (list below)
PHA Plan Supporting Documents are available for inspection at: (select all that apply)
Main business office of the PHA PHA development management offices

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Other (list below)

Streamlined Annual PHA Plan

Fiscal Year 2006

[24 CFR Part 903.12(c)]

Table of Contents

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of
supporting

documents available for public inspection.

A. PHA PLAN COMPONENTS

1. Site-Based Waiting List Policies

903.7(b)(2) Policies on Eligibility, Selection, and Admissions

2. Capital Improvement Needs

903.7(g) Statement of Capital Improvements Needed

3. Section 8(y) Homeownership

903.7(k)(1)(i) Statement of Homeownership Programs

4. Project-Based Voucher Programs
5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
6. Supporting Documents Available for Review
7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
8. Capital Fund Program 5-Year Action Plan

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Streamlined Annual Plan identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment,

approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, Certification for a Drug-Free Workplace;

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL & SF-LLLa, Disclosure of Lobbying Activities.

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1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies) – N/A

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B.

Site-Based Waiting Lists

Development

Information:

(Name, number, location)

Date

Initiated

Initial mix of

Racial, Ethnic or

Disability

Demographics

Current mix of

Racial, Ethnic or

Disability

Demographics

since Initiation of

SBWL

Percent

change

between initial

and current

mix of Racial,

Ethnic, or

Disability

demographics

2. What is the number of site based waiting list developments to which families may apply at one time?
3. How many unit offers may an applicant turn down before being removed from the sitebased waiting list?
4. Yes No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

B. Site-Based Waiting Lists – Coming Year

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component.

1. How many site-based waiting lists will the PHA operate in the coming year?
2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?

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If yes, how many lists?

3. Yes No: May families be on more than one list simultaneously

If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the sitebased waiting lists (select all that apply)?

PHA main administrative office

All PHA development management offices

Management offices at developments with site-based waiting lists

At the development to which they would like to apply

Other (list below)

2. Capital Improvement Needs

[24 CFR Part 903.12 (c), 903.7 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Capital Fund Program

1. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2. Yes No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

1. Yes No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).
2. Status of HOPE VI revitalization grant(s):

PHA Name: Housing Authority of the City of Flatonia Streamlined Annual Plan for Fiscal Year 2006

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HOPE VI Revitalization Grant Status

a. Development Name:

b. Development Number:

c. Status of Grant:

Revitalization Plan under development

Revitalization Plan submitted, pending approval

Revitalization Plan approved

Activities pursuant to an approved Revitalization Plan underway

3. Yes No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name(s) below:

4. Yes No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:

5. Yes No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program
– N/A

(if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]

1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to the next component; if “yes”, complete each program description below (copy and complete questions for each program identified.)

2. Program Description:

a. Size of Program

Yes No: Will the PHA limit the number of families participating in the Section 8 homeownership option?

If the answer to the question above was yes, what is the maximum number of participants this fiscal year?

b. PHA-established eligibility criteria

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Yes No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria:

c. What actions will the PHA undertake to implement the program this year (list)?

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:

The PHA has demonstrated its capacity to administer the program by (select all that apply):
Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.

Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.

Partnering with a qualified agency or agencies to administer the program (list name(s))

and years of experience below):

Demonstrating that it has other relevant experience (list experience below):

4. Use of the Project-Based Voucher Program – N/A

Intent to Use Project-Based Assistance

Yes No: Does the PHA plan to “project-base” any tenant-based Section 8 vouchers in the coming year? If the answer is “no,” go to the next component. If yes, answer the following questions.

1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:

low utilization rate for vouchers due to lack of suitable rental units

access to neighborhoods outside of high poverty areas

other (describe below):

2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

PHA Name: Housing Authority of the City of Flatonia Streamlined Annual Plan for Fiscal Year 2006

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1. Consolidated Plan jurisdiction: (provide name here) State of Texas

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.

The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

Other: (list below)

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

.. Increase and preserve the availability of safe, decent, and affordable housing for very low, low, and moderate income persons and families.

.. Improve the quality of assisted housing.

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HA Code: TX297

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6. Supporting Documents Available for Review for Streamlined Annual PHA

Plans

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review

Applicable

& On

Display

Supporting Document Related Plan Component

N/A

PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;

5 Year and Annual Plans

X

PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan
Streamlined Annual Plans

N/A

Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.

5 Year and standard Annual

Plans

X

Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.

5 Year and Annual Plans

X

Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenantbased waiting lists.

Annual Plan:

Housing Needs

X

Most recent board-approved operating budget for the public housing program Annual Plan:
Financial Resources

X

Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.

Annual Plan: Eligibility,
Selection, and Admissions

Policies

X

Deconcentration Income Analysis Annual Plan: Eligibility,
Selection, and Admissions

Policies

X

Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. Check here if included in the public housing A&O Policy.

Annual Plan: Eligibility,
Selection, and Admissions

Policies

N/A

Section 8 Administrative Plan

Annual Plan: Eligibility,

Selection, and Admissions
Policies

X

Public housing rent determination policies, including the method for setting public housing flat rents.

Check here if included in the public housing A & O Policy.

Annual Plan: Rent

Determination

X

Schedule of flat rents offered at each public housing development.

Check here if included in the public housing A & O Policy.

Annual Plan: Rent

Determination

N/A

Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. Check here if included in Section 8 Administrative Plan.

Annual Plan: Rent

Determination

X

Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).

Annual Plan: Operations
and Maintenance

X

Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).

Annual Plan: Management
and Operations

X

Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)

Annual Plan: Operations and
Maintenance and
Community Service & Self

PHA Name: Housing Authority of the City of Flatonia Streamlined Annual Plan for Fiscal Year 2006
HA Code: TX297

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List of Supporting Documents Available for Review

Applicable

& On

Display

Supporting Document Related Plan Component

Sufficiency

N/A

Results of latest Section 8 Management Assessment System (SEMAP) Annual Plan: Management
and Operations

N/A

Any policies governing any Section 8 special housing types

Check here if included in Section 8 Administrative Plan

Annual Plan: Operations
and Maintenance

X

Public housing grievance procedures

Check here if included in the public housing A & O Policy

Annual Plan: Grievance

Procedures

N/A

Section 8 informal review and hearing procedures.

Check here if included in Section 8 Administrative Plan.

Annual Plan: Grievance

Procedures

X

The Capital Fund/Comprehensive Grant Program Annual Statement

/Performance and Evaluation Report for any active grant year.

Annual Plan: Capital Needs

N/A

Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.

Annual Plan: Capital Needs

N/A

Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.

Annual Plan: Capital Needs

X

Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).

Annual Plan: Capital Needs

N/A

Approved or submitted applications for demolition and/or disposition of public housing.

Annual Plan: Demolition

and Disposition

N/A

Approved or submitted applications for designation of public housing (Designated Housing Plans).

Annual Plan: Designation of

Public Housing

N/A

Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.

Annual Plan: Conversion of

Public Housing

X

Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.

Annual Plan: Voluntary

Conversion of Public

Housing

N/A

Approved or submitted public housing homeownership programs/plans. Annual Plan: Homeownership

N/A

Policies governing any Section 8 Homeownership program

(Section _____ of the Section 8 Administrative Plan)

Annual Plan:

Homeownership

X

Public Housing Community Service Policy/Programs

Check here if included in Public Housing A & O Policy

Annual Plan: Community

Service & Self-Sufficiency

N/A

Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.

Annual Plan: Community

Service & Self-Sufficiency

N/A

FSS Action Plan(s) for public housing and/or Section 8. Annual Plan: Community

Service & Self-Sufficiency

X

Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.

Annual Plan: Community

Service & Self-Sufficiency

N/A

Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.

Annual Plan: Community

Service & Self-Sufficiency

X

Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G).

Check here if included in the public housing A & O Policy.

Annual Plan: Pet Policy

X

The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.

Annual Plan: Annual Audit

N/A

Other supporting documents (optional)

(list individually; use as many lines as necessary)

(specify as needed)

N/A

Consortium agreement(s) and for Consortium Joint PHA Plans Only:

Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.

Joint Annual PHA Plan for

Consortia: Agency

Identification and Annual

Management and Operations

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Summary

PHA Name: Housing Authority of the City of Flatonia Grant Type and Number

Capital Fund Program Grant No: TX59-P297-50106

Replacement Housing Factor Grant No:

Federal FY

of Grant:

2006

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line No. Summary by Development Account Total Estimated Cost Total Actual Cost

Original Revised Obligated Expended

1 Total non-CFP Funds

2 1406 Operations \$ 2,000

3 1408 Management Improvements

4 1410 Administration 1,000

5 1411 Audit

6 1415 Liquidated Damages

7 1430 Fees and Costs 3,000

8 1440 Site Acquisition

9 1450 Site Improvement 500

10 1460 Dwelling Structures 14,754

11 1465.1 Dwelling Equipment—Nonexpendable 1,500

12 1470 Nondwelling Structures 500

13 1475 Nondwelling Equipment 500

14 1485 Demolition

15 1490 Replacement Reserve

16 1492 Moving to Work Demonstration

17 1495.1 Relocation Costs

18 1499 Development Activities

19 1501 Collateralization or Debt Service

20 1502 Contingency

21 Amount of Annual Grant: (sum of lines 2 – 20) \$23,754

22 Amount of line 21 Related to LBP Activities

23 Amount of line 21 Related to Section 504 compliance

24 Amount of line 21 Related to Security – Soft Costs

25 Amount of Line 21 Related to Security – Hard Costs

26 Amount of line 21 Related to Energy Conservation Measures

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Housing Authority of the City of

Flatonia

Grant Type and Number

Capital Fund Program Grant No: TX59-P297-50106

Replacement Housing Factor Grant No:

Federal FY of Grant: 2006

Development

Number

Name/HA-Wide

Activities

General Description of Major
Work Categories
Dev. Acct
No.
Quantity Total Estimated Cost
Total Actual Cost Status of
Work
Original Revised Funds Obligated Funds
Expended
HA Wide Operations 1406 N/A \$2,000
HA Wide Administration 1410 N/A 1,000
HA Wide Fees & Costs 1430 N/A 3,000
HA Wide Site Grading, Drainage,
Sidewalks, Lawn Maintenance
1450 N/A 500
TX297 Bathroom Renovations 1460 21 du 14,754
HA Wide Ranges & Refrigerators 1465 2 ea 1,500
HA Wide M&M Building improvements 1470 various 500
HA Wide Maintenance and Administrative
Equipment
1475 various 500

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement
Housing Factor

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Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule
PHA Name: Housing Authority of the City
of Flatonia
Grant Type and Number
Capital Fund Program No: TX59-P297-50106
Replacement Housing Factor No:
Federal FY of Grant: 2006
Development Number
Name/HA-Wide
Activities
All Fund Obligated
(Quarter Ending Date)
All Funds Expended
(Quarter Ending Date)
Reasons for Revised Target Dates
Original Revised Actual Original Revised Actual
HA Wide/TX297 07/18/2008 07/18/2010

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement
Housing Factor

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Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I:
Summary
PHA Name: Housing Authority of the City of Flatonia Grant Type and Number

Capital Fund Program Grant No: TX59-P297-50105

Replacement Housing Factor Grant No:

Federal FY of

Grant: 2005

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: March 31, 2006 Final Performance and Evaluation Report

Line Summary by Development Account Total Estimated Cost Total Actual Cost

Original Revised Obligated Expended

1 Total non-CFP Funds

2 1406 Operations \$1,000 -0- -0- -0-

3 1408 Management Improvements

4 1410 Administration 1,000 -0- -0- -0-

5 1411 Audit

6 1415 Liquidated Damages

7 1430 Fees and Costs 3,000 -0- -0- -0-

8 1440 Site Acquisition

9 1450 Site Improvement

10 1460 Dwelling Structures 3,176 -0- -0- -0-

11 1465.1 Dwelling Equipment—Nonexpendable 2,500 -0- -0- -0-

12 1470 Nondwelling Structures 14,569 -0- -0- -0-

13 1475 Nondwelling Equipment

14 1485 Demolition

15 1490 Replacement Reserve

16 1492 Moving to Work Demonstration

17 1495.1 Relocation Costs

18 1499 Development Activities

19 1501 Collateralization or Debt Service

20 1502 Contingency

21 Amount of Annual Grant: (sum of lines 2 – 20) \$25,245 -0- -0- -0-

22 Amount of line 21 Related to LBP Activities

23 Amount of line 21 Related to Section 504 compliance

24 Amount of line 21 Related to Security – Soft Costs

25 Amount of Line 21 Related to Security – Hard Costs

26 Amount of line 21 Related to Energy Conservation Measures

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Housing Authority of the City of Flatonia Grant Type and Number

Capital Fund Program Grant No: TX59-P297-50105

Replacement Housing Factor Grant No:

Federal FY of Grant: 2005

Development Number

Name/HA-Wide

Activities

General Description of Major Work

Categories

Dev. Acct

No.

Quantity Total Estimated

Cost
Total Actual Cost Status of
Work
Original Revised Funds
Obligated
Funds
Expended
HA Wide Operations 1406 N/A \$1,000 -0- -0- -0-
HA Wide Administration 1410 N/A 1,000 -0- -0- -0-
HA Wide Fees & Costs 1430 N/A 3,000 -0- -0- -0-
TX297-001 Bathroom Renovations 1460 3,176 -0- -0- -0-
TX297-001 Ranges & Refrigerators 1465 4 each 2,500 -0- -0- -0-
HA Wide M&M Building Improvements 1470 N/A 14,569 -0- -0- -0-

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule
PHA Name: Housing Authority of the City of
Flatonia
Grant Type and Number
Capital Fund Program No: TX59-P297-50105
Replacement Housing Factor No:
Federal FY of Grant: 2005
Development Number
Name/HA-Wide
Activities
All Fund Obligated
(Quarter Ending Date)
All Funds Expended
(Quarter Ending Date)
Reasons for Revised Target Dates
Original Revised Actual Original Revised Actual
TX297-001 & HA Wide 08/19/2007 08/19/2009

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I:
Summary
PHA Name: Housing Authority of the City of Flatonia Grant Type and Number
Capital Fund Program Grant No: TX59-P297-50104
Replacement Housing Factor Grant No:
Federal FY of
Grant: 2004
Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
#2
Performance and Evaluation Report for Period Ending: 03/31/2006 Final Performance and Evaluation
Report

Line Summary by Development Account Total Estimated Cost Total Actual Cost

Original Revised Obligated Expended

1 Total non-CFP Funds

2 1406 Operations \$7,676 \$6,571 -0- -0-

3 1408 Management Improvements

4 1410 Administration 1,000 2,000 \$2,000 -0-

5 1411 Audit

6 1415 Liquidated Damages

7 1430 Fees and Costs 3,000 3,000 3,000 -0-

8 1440 Site Acquisition 11,688 11,688 11,688 \$11,688.22

9 1450 Site Improvement

10 1460 Dwelling Structures

11 1465.1 Dwelling Equipment—Nonexpendable 3,000 3,000 3,000 -0-

12 1470 Nondwelling Structures 2,312 2,417 2,417

13 1475 Nondwelling Equipment 4,000 4,000 4,000 -0-

14 1485 Demolition

15 1490 Replacement Reserve

16 1492 Moving to Work Demonstration

17 1495.1 Relocation Costs

18 1499 Development Activities

19 1501 Collateralization or Debt Service

20 1502 Contingency

21 Amount of Annual Grant: (sum of lines 2 – 20) \$32,676 \$32,676 \$26,105 \$11,688.22

22 Amount of line 21 Related to LBP Activities

23 Amount of line 21 Related to Section 504 compliance

24 Amount of line 21 Related to Security – Soft Costs

25 Amount of Line 21 Related to Security – Hard Costs

26 Amount of line 21 Related to Energy Conservation

Measures

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Housing Authority of the City of Flatonia Grant Type and Number

Capital Fund Program Grant No: TX59-P297-50104

Replacement Housing Factor Grant No:

Federal FY of Grant: 2004

Development

Number

Name/HA-Wide

Activities

General Description of Major Work

Categories

Dev.

Acct

No.

Quantity Total Estimated

Cost

Total Actual Cost Status of

Work

Original Revised Funds

Obligated
Funds
Expended
HA Wide Operations 1406 N/A \$7,676 \$6,571 -0- -0- Pending
HA Wide Administrative Sundry 1410 N/A 1,000 2,000 \$2,000 -0- Pending
HA Wide Fees and costs 1430 N/A 3,000 3,000 3,000 -0- Pending
HA Wide Acquisition of Land for Future Development
or M&M
1440 One 14,000 11,688 11,688 11,688.22 Completed
TX297-001 Ranges and refrigerators 1465 4 each 3,000 3,000 3,000 -0- Pending
HA Wide M&M Improvements 1470 N/A -0- 2,417 2,417 -0- Pending
HA Wide Maintenance Equipment, including lawn and
other related equipment
1475 Various 1,500 1,500 1,500 -0- Pending
HA Wide Administrative Equipment, including
computer and other related upgrades
1475 Various 2,500 2,500 2,500 -0- Pending

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule
PHA Name: Housing Authority of the City of
Flatonia
Grant Type and Number
Capital Fund Program No: TX59-P297-50104
Replacement Housing Factor No:
Federal FY of Grant: 2004
Development Number
Name/HA-Wide
Activities
All Fund Obligated
(Quarter Ending Date)
All Funds Expended
(Quarter Ending Date)
Reasons for Revised Target Dates
Original Revised Actual Original Revised Actual
TX297-001 & HA Wide 09/13/2006 -0- 04/30/2006 09/13/2008 -0- -0-

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I:
Summary
PHA Name: Housing Authority of the City of Flatonia Grant Type and Number
Capital Fund Program Grant No: TX59-P297-50203
Replacement Housing Factor Grant No:
Federal FY of
Grant: 2003

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
Performance and Evaluation Report for Period Ending: 03/31/2006 Final Performance and Evaluation
Report

Line Summary by Development Account Total Estimated Cost Total Actual Cost

Original Revised Obligated Expended

1 Total non-CFP Funds

2 1406 Operations

3 1408 Management Improvements

4 1410 Administration

5 1411 Audit

6 1415 Liquidated Damages

7 1430 Fees and Costs

8 1440 Site Acquisition

9 1450 Site Improvement

10 1460 Dwelling Structures \$5,623 \$5,623 \$4,026.73

11 1465.1 Dwelling Equipment—Nonexpendable

12 1470 Nondwelling Structures

13 1475 Nondwelling Equipment

14 1485 Demolition

15 1490 Replacement Reserve

16 1492 Moving to Work Demonstration

17 1495.1 Relocation Costs

18 1499 Development Activities

19 1501 Collateralization or Debt Service

20 1502 Contingency

21 Amount of Annual Grant: (sum of lines 2 – 20) \$5,623 \$5,623 \$4,026.73

22 Amount of line 21 Related to LBP Activities

23 Amount of line 21 Related to Section 504 compliance

24 Amount of line 21 Related to Security – Soft Costs

25 Amount of Line 21 Related to Security – Hard Costs

26 Amount of line 21 Related to Energy Conservation

Measures

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement
Housing Factor

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Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Housing Authority of the City of Flatonia Grant Type and Number

Capital Fund Program Grant No: TX59-P297-50203

Replacement Housing Factor Grant No:

Federal FY of Grant: 2003

Development

Number

Name/HA-Wide

Activities

General Description of Major Work

Categories

Dev. Acct

No.

Quantity Total Estimated

Cost

Total Actual Cost Status of

Work

Original Revised Funds

Obligated

Funds

Expended

TX297-001 Continuation of Utility Rooms 1460 2 \$5,623 \$5,623 \$4,026.73 In Progress

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

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Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

PHA Name: Housing Authority of the City of

Flatonia

Grant Type and Number

Capital Fund Program No: TX59-P297-50203

Replacement Housing Factor No:

Federal FY of Grant: 2003

Development Number

Name/HA-Wide

Activities

All Fund Obligated

(Quarter Ending Date)

All Funds Expended

(Quarter Ending Date)

Reasons for Revised Target Dates

Original Revised Actual Original Revised Actual

TX297-001 02/12/2006 -0- 07/31/2005 02/12/2008 -0- -0-

8. Capital Fund Program Five-Year Action Plan

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Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Housing Authority of the City of Flatonia

Original 5-Year Plan

Revision No:

Development

Number/Name/

HA-Wide

Year 1

Work Statement

for Year 2

FFY Grant: 2007

PHA FY: 2007

Work Statement

for Year 3

FFY Grant: 2008

PHA FY: 2008

Work Statement

for Year 4

FFY Grant: 2009

PHA FY: 2009
Work Statement
for Year 5
FFY Grant: 2010
PHA FY: 2010
Annual
Statement
HA Wide \$ 10,000 \$ 11,254 \$ 11,254 \$ 11,254
TX297 13,754 12,500 12,500 12,500
CFP Funds Listed
for 5-year
planning
\$ 23,754 \$ 23,754 \$ 23,754
\$ 23,754
Replacement
Housing Factor
Funds

8. Capital Fund Program Five-Year Action Plan

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Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities

for

Year 1

Activities for Year :2007

FFY Grant: 2007

PHA FY: 2007

Activities for Year: 2008

FFY Grant: 2008

PHA FY: 2008

Development

Name/Number

Major Work Categories Estimated

Cost

Development

Name/Number

Major Work Categories Estimated

Cost

See

Annual HA Wide Operations \$ 3,000 HA Wide Operations \$ 2,754

Statement HA Wide Administration 1,000 HA Wide Administration 1,000

HA Wide Fees and Costs 3,000 HA Wide Management Improvements 1,000

TX297 Bathroom Renovations 13,754 HA Wide Fees and Costs 3,000

HA Wide Ranges and Refrigerators 3,000 TX297 Kitchen Renovations 9,000

TX297 Exterior Repairs & Painting 3,500

HA Wide Landscaping, Sidewalks,

Drives, Grading & Drainage,

other site improvements

1,500

HA Wide M&M Building Repairs 1,000

HA Wide Administration & Maintenance

Equipment

1,000

Total CFP Estimated Cost \$ 23,754 \$ 23,754

8. Capital Fund Program Five-Year Action Plan

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Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities

for

Year 1

Activities for Year :2009

FFY Grant: 2009

PHA FY: 2009

Activities for Year: 2010

FFY Grant: 2010

PHA FY: 2010

Development

Name/Number

Major Work Categories Estimated

Cost

Development

Name/Number

Major Work Categories Estimated

Cost

See

Annual HA Wide Operations \$ 2,754 HA Wide Operations \$ 2,754

Statement HA Wide Administration 1,000 HA Wide Administration 1,000

HA Wide Management Improvements 1,000 HA Wide Management Improvements 1,000

HA Wide Fees and Costs 3,000 HA Wide Fees and Costs 3,000

TX297 Kitchen Renovations 9,000 TX297 Kitchen Renovations 9,000

TX297 Exterior Repairs & Painting 3,500 TX297 Exterior Repairs & Painting 3,500

HA Wide Landscaping, Sidewalks, Drives,

Grading & Drainage, other site

improvements

1,500 HA Wide Landscaping, Sidewalks,

Drives, Grading & Drainage,

other site improvements

1,500

HA Wide M&M Building Repairs 1,000 HA Wide M&M Building Repairs 1,000

HA Wide Administration & Maintenance

Equipment

1,000 HA Wide Administration & Maintenance

Equipment

1,000

Total CFP Estimated Cost \$ 23,754 \$ 23,754